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## UTILITY PATENT APPLICATION **TRANSMITTAL**

Attorney Docket No. SC06082-01 First Inventor Inna Karpov Title EMULSION COMPOSITION Express Mail Label No. EV 334446461 LIS

(Only for new nonprovisional applications under 37 CFR 1.53(b))

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application	ADDRESS TO:  ADDRESS TO:  Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450
1.  Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) Applicant claims small entity status. See 37 CFR 1.27.  3.  Specification [Total Pages_29] (preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table. or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure  4.  Drawing(s) (35 U.S.C. 113) [Total Sheets	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)  8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)  a. Computer Reader Form (CRF)  b. Specification Sequence Listing on:  i. CD-ROM or CD-R (2 copies); or  ii. Paper  c. Statements verifying identity of above copies  ACCOMPANYING APPLICATION PARTS  9. Assignment Papers (cover sheet & document(s))  10. 37 CFR 3.73(b) Statement Power of (when there is an assignee) Attorney  11. English Translation Document (if applicable)  12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations  13. Preliminary Amendment  14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)  15. Certified Copy of Priority Document(s) (if foreign priority is claimed)  16. Nonpublication Request under 35 U.S.C. 122
6. Application Data Sheet. See 37 CFR 1.76	(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.  Other: S-P Cover Sheet - 1pg.
18. If a CONTINUING APPLICATION, check appropriate	nov and supply the requisite information below and in the first
specification following the title, or in an Application Data S	heet under 37 CFR 1 76:
_	
Continuation Divisional	Continuation-in-part (CIP) of prior application No.:
Prior application information: Examiner	Art Unit:
For CONTINUATION OF DIVISIONAL APPS only; The entire dis	closure of the prior conflication for the state of the st
	costile of the prior application, from which an oath or declaration is supplied under Box continuation or divisional application and is hereby incorporated by reference.  been inadvertently omitted from the submitted application parts.
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	908-298-2908 908-298-5388
Name (Print/Type) Robert A Franks	Registration No. (Attorney/Agent) 28,605
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This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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FEE TRANSMITTAL		Complete if Known								
for FY 2003			Application Number							
			Filing Date				08/04/2003			
Effective 01/01/2003. Patent fees are subject to annual revision.			First Named Inventor				Inna Karpov			
			Examiner Name							
Applicant claims small entity status. See 37 CFR 1.27		Art Unit								
TOTAL AMOUNT OF PAYMENT (\$) 1,038.00	0	Attorney Docket No. SC06082-01								
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)								
Check Credit card Money Other None 3. ADDITIONAL FEES										
Deposit Account:		ge Entity   Small Entity								
Deposit Account 19-0365	Fee Code	Fee (\$)	Fee Code	Fee (\$)		Fee	Description	Fee Paid		
Number 19-0303	1051		2051	65	_		e filing fee or oath			
Account Name Schering-Plough Corporation	1052	50	2052	25		narge - late provisional filing fee or				
The Commissioner is authorized to: (check all that apply)	1053		1053			English specification				
Charge fee(s) indicated below Credit any overpayments	1812 1804	2,520 920*	1812				uest for ex parte reexaminatio	^ <del> </del>		
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1. BASIC FILING FEE	1252	410	2252				eply within second month			
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Code (\$) Code (\$)		1,450	2254	725			eply within fourth month			
1001 750 2001 375 Utility filing fee 750.00		1,970	2255				eply within fifth month			
1002 330 2002 165 Design filing fee 1003 520 2003 260 Plant filing fee	1401 1402	320	2401			of Appe				
1003 520 2003 260 Plant filing fee 1004 750 2004 375 Reissue filing fee	1402	320 280	2402 2403				support of an appeal al hearing			
1005 160 2005 80 Provisional filing fee		1,510					tute a public use proceeding			
SUBTOTAL (1) (\$) 750.00	1452	110	2452				re - unavoidable			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1453	1,300	2453	650	Petitio	ion to revive - unintentional				
Fee from _		1,300	2501				(or reissue)			
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Independent 6 - 3** = 3 x 84 = 252.00	1503 1460	630 130	2503 1460			ssue fee	Commissioner	<u> </u>		
Multiple Dependent	1807	50	1807				under 37 CFR 1.17(q)	<b></b>		
Large Entity   Small Entity Fee Fee   Fee Fee Fee Description	1806	180	1806				Information Disclosure Stmt			
Fee Fee Fee Fee <u>Fee Description</u> Code (\$)	8021	40	8021	40	Record	ing each	patent assignment per			
1202 18 2202 9 Claims in excess of 20	1809	750	2809				number of properties) sion after final rejection			
1201 84 2201 42 Independent claims in excess of 3 1203 280 2203 140 Multiple dependent claim, if not paid					(37 CF	R 1.129(	(a))			
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**or number previously paid, if greater; For Reissues, see above	, redu	ceu by	udale F	miy re	e Paid	S	SUBTOTAL (3) (\$) 0.00			
SUBMITTED BY	L	naister t	ion Ala	_			(Complete (if applicable)			
Name (Print/Type) Robert A Franks Registration No. 28,605 Telephone 908-298-2908										
Signature / Company of the Company o	16	-				I	Date Cua 4	7003		

be included n this form. Pr vide credit card inf rmation and authorization n PTO-2038.

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